PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  2 1 5 6 8 15 2												2
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OR	OTHER SMALL	1
TOTAL CLAIMS			21					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	€ 355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2 minus 20=		• 1			X\$ 9=		OR	X\$18=	В
INDEPENDENT CLAIMS			ろ minus 3 =		•			X40=	1	OR	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						İ	TOTAL	<u> </u>	OR	TOTAL	72K	
3/04 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									ENTITY	OR	OTHER SMALL	THAN NTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.22	Minus	2		= /		X\$ 9=		OR	X\$18=	\$18
	Independent	• 4	Minus	3	F C! A!A	<u> =                                    </u>		X40=		OR	X80=	\$86
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=		OR	+270=	
NACULIS							TOTA ADDIT. FE		OR	TOTAL ADDIT, FEE	al	
	LLPY/	(Column 1)		(Colu	mn 2)	(Column 3)		AUUII. FE	E <b>(,</b>		ADDII. 1 EE	42
AMENDMENT B		/ CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.32	Minus	2	3	=	▋	X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	ENDEN	TCLAIM		4	X40=		OR	X80=/	
<u> </u>	FINST PRESE	NIATION OF MI	DETIFEE DEF	ENDEN	CERTIFI			+135=		OR	+270=	
								TOTA ADDIT. FE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3	<u> </u>					
AMENDMENT C	Power of the Control	CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••	<u>-</u>	=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	•••		-	4	X40=	1	OR	X80=	
Ĺ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM			+135=		OR	+270=	
••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The Highest Nun	mber Previously Pa nber Previously Pa	id For (Total o	r Independ	dent) is the	an 3, enter 3. e highest numt	er fo	und in the	appropriate bo	x in c	olumn 1.	

**Application or Docket Number**